

CLAIMS ONLY						Application Number <b>10713000</b>	Filing Date					
						Applicant(s)						
						* May be used for additional claims or amendments						
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend						
1	1					51						
2		1				52						
3			1			53						
4				1		54						
5					1	55						
6						56						
7	1					57						
8		1				58						
9			1			59						
10				1		60						
11					1	61						
12						62						
13	1					63						
14		1				64						
15			1			65						
16				1		66						
17					1	67						
18						68						
19	1					69						
20		1				70						
21			1			71						
22				1		72						
23	1				1	73						
24						74						
25						75						
26						76						
27						77						
28						78						
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39						89						
40						90						
41						91						
42						92						
43						93						
44						94						
45						95						
46						96						
47						97						
48						98						
49						99						
50						100						
Total Indep	4					Total Indep						
Total Depend	19	19	19	19	19	Total Depend						
Total Claims	23					Total Claims						